DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

Docket Number 13DV13824

As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: DOCUMENTING AND COMMUNICATING SYSTEM AND METHOD the specification of which is attached hereto OR as United States Application Number or PCT International Application Number was filed on and was amended on (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365 (b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. **Priority Claimed** PRIOR FOREIGN APPLICATION(s) 13 ☐ Yes ☐ No (Day/Month/Year Filed) (Country) (Number) 2 per ☐ Yes ☐ No l,F (Day/Month/Year Filed) (Number) (Country) Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto. Phereby claim the benefit under Title 35, United States Code §119 (e) of any United States provisional application(s) listed below. Additional provisional application numbers are listed on a m (Filing Date) supplemental priority data sheet (Application Number) ļ. attached hereto. bereby claim the benefit under Title 35, United States Code §120 of any United States Application(s), or §365 (c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. (Status - patented, pending, abandoned) (Filing Date) (Application Number) (Status - patented, pending, abandoned) (Filing Date) (Application Number) I hereby appoint the registered practitioners associated with Customer Number 006111 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Address all telephone calls to: WILLIAM SCOTT ANDES (513) 243-5955 _ at telephone number Address all correspondence to: GENERAL ELECTRIC COMPANY ATTN: ANDREW C. HESS **GE AIRCRAFT ENGINES** ONE NEUMANN WAY, M/D H17 **CINCINNATI, OH 45215-6301** PATENT TRADEHARK OFFICE Page 1 of 3 GEAE (9/97) **CUSTOMER NUMBER: 006111**

| Docket | Number |
|--------|--------|
| 13DV | 713824 |

Page 2 of

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| SOLE OR FIRST INVENTOR: | |
|---|------------------------|
| Full name: KARL STEPHEN FESSENDEN | |
| Signature: Middle Name Signature: Lessenden | Last Name |
| Residence: WILDER, KENTUCKY City and State | Citizenship: US |
| Post Office Address: 62 SENTRY DRIVE, WILDER, KY 41076 | |
| SECOND JOINT INVENTOR: | |
| Signature: RICHARD WILLIAM GEIBEL First Name Middle Name Middle Name | Last Name |
| Residence: CINCINNATI, OHIO City and State | Citizenship: US |
| Post Office Address: 7076 GOLDENGATE DR., CINCINNATI, O | H 45244 |
| THIRD JOINT INVENTOR: Full name: ERIC SCOTT HURON First Name Middle Name Signature: Low Lott Afron | Last Name Date 4-18-0/ |
| Residence: WEST CHESTER, OHIO | Citizenship: US |
| Post Office Address: 6785 OLD STATION DRIVE, WEST CHEST | |
| FOURTH JOINT INVENTOR: Full name: CHUNILAL KERAI First Name Middle Name | Last Name |
| Signature: | Date 22 May 01 |
| Residence: CARDIFF, WALES City and State | Citizenship: GB |
| Post Office Address: 18 AUBREY AVE, VICTORIA PARK, CARI | DIFF CF51AQ, WALES |
| | |

GEAE (9/97)

| FIFTH JOINT I | | | | | |
|---|---|--------------|-----------------------|--|--|
| Full name: N | NEIL WALBE First Name | OF | Middle Name | Last Name | *** |
| . | I list value | I was | . — | | 2nd May 2001 |
| Signature: _ | Nev | I MEN | | Date | 200 May 2001 |
| Residence: | GWENT, W | ALES | | Citizenship: GB | 9 |
| | City and State | | | | |
| Post Office Ac | ddress: 20 | CREENEIEI D | CREASENT REALIEC | ORT, EBBW UALE, GWEI | NT NP235PF WALES |
| | | SKEDINI ILDO | CREAGEIVI, BEATOI C | MI, EDD W CIED, GWE | VI 141 25511, WILLES |
| | | | | | |
| | IND (TAITOD: | | | | |
| SIXTH JOINT | | | • | | |
| ruii fiame. <u>J</u> | First Name | UL GRIFFITHS | Middle Name | Last Name | |
| Cianoturo: | 20 | = white | | Date | 22 May 200 |
| Signature: _ | | 10-110 | | Date | 1000 |
| Residence: | MID-GLAM | , WALES | | Citizenship: GB | |
| | City and State | | | . <u> </u> | The state of the s |
| Post Office Ad | ddraea. *** | TNIDDIIGH 60 | I AN PARK RD PON | TYPRIDO, MID-GLAM C | F372DI WALES |
| | uaress. w | | | | 1 3 1 2 D D , 11 1 A D D D |
| 7 001 011100 71 | udress. <u>W</u> | INDRUSII 09, | Diritimatico, i or | | |
| | daress. W | INDROSIT 09, | Din Timilio, 101 | | |
| | daress. <u>W</u> | INDRUSII 09, | D.H.(17.HH116), 1 0.1 | | |
| SEVENTH JO | _ | | D.H.(11.HH.16.,1.5.) | | |
| | _ | | | | |
| SEVENTH JO | _ | | Middle Name | Last Name | |
| SEVENTH JO | INT INVENTO | | | Last Name | |
| SEVENTH JO Full name: | INT INVENTO | | | Last Name | |
| SEVENTH JO Full name: | First Name | | | Last Name | |
| SEVENTH JO Full name: | INT INVENTO | | | Last Name Date | |
| SEVENTH JO Full name: | First Name City and State | | | Last Name Date | |
| SEVENTH JO Full name: Signature: Residence: | First Name City and State | | | Last Name Date | |
| SEVENTH JO Full name: Signature: Residence: | First Name City and State | | | Last Name Date | |
| SEVENTH JO Full name: Signature: Residence: Post Office Ad | First Name City and State | DR: | | Last Name Date | |
| SEVENTH JO Full name: Signature: Residence: Post Office Ac | First Name City and State | DR: | | Last Name Date | |
| SEVENTH JO Full name: Signature: Residence: Post Office Ad | First Name City and State ddress: | DR: | Middle Name | Last Name Date Citizenship: | |
| SEVENTH JO Full name: Signature: Residence: Post Office Ac EIGHTH JOIN Full name: | First Name City and State ddress: T INVENTOR First Name | DR: | Middle Name | Last Name Date Citizenship: Last Name | |
| SEVENTH JO Full name: Signature: Residence: Post Office Ac EIGHTH JOIN Full name: | First Name City and State ddress: T INVENTOR First Name | DR: | Middle Name | Last Name Date Citizenship: Last Name | |
| SEVENTH JO Full name: Signature: Residence: Post Office Ad EIGHTH JOIN' Full name: Signature: | First Name City and State ddress: T INVENTOR First Name | DR: | Middle Name | Last Name Date Citizenship: Last Name Date | |
| SEVENTH JO Full name: Signature: Residence: Post Office Ac EIGHTH JOIN Full name: | First Name City and State ddress: T INVENTOR First Name | DR: | Middle Name | Last Name Date Citizenship: Last Name Date | |
| SEVENTH JO Full name: Signature: Residence: Post Office Ad EIGHTH JOIN' Full name: Signature: | First Name City and State ddress: T INVENTOR First Name | DR: | Middle Name | Last Name Date Citizenship: Last Name Date | |

GEAE (9/97)